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				u.s.	Patent and Tr	rademar	k Office: U.S. DE	07/31/2006. OMB 0651-0031 PARTMENT OF COMMERCE	
Under the Pape	eniork Redi	uction Act of 1995.	no persor	Application Number	10/78			A VALID CAME CONTROL AUTOSAF.	
TRANSMITTAL				Filing Date		2/20/2004			
114	FOR			First Named Inventor Daniel Watson				PECENIEL	
·				Art Unit	1742			CENTRAL FAX CEN	
(to be used for all correspondence after initial filing)				Examiner Name	Mich	ael P.	Alexander	•	
Total Number of Pages in This Submission 23				Attorney Docket Number	1157.	.05		APR 2 0 20	
			ENC	LOSURES (Check a	ll that apply	,)			
7	:			Drawing(s)			After Allowan	ice Communication to TC	
	ree Attached			Licensing-related Papers		H		munication to Board	
Amendme			\boxtimes	Petition			of Appeals and Interferences Appeal Communication to TC [Appeal Notice, Brief, Reply Brief)		
	er Final			Petition to Convert to a Provisional Application			Proprietary Information		
一一				Power of Attorney, Revocation			Status Letter		
Extension		claration(s)	M	Change of Correspondence Address Terminal Disclaimer			Other Enclosure(s) (please Identify below):		
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rinted name		y K.B. Busl			•				
Date 4/20/2006				Reg. Np. 32,202					
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he date shown be Signature	elow;		M						
Typed or printed name Richard Yuen			uen				Date	4/20/2006	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Tradamark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004.

Complete If Known

Effective on 12/C8/2004.		Complete If Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 48		10/783,932		}		
FEE TRANSMITTAL	Filing Date	2/20/2004	REGE	PED		
For FY 2005	First Named Inventor	Daniel Watson	GENTRAL FAX	CENTER		
Applicant claims small entity status. See 37 CFR 1.27	Examiner Name	Alexander, Mich	2000			
Applicant claims small entity status. See 37 CFR 1.27	Art Unit	1742	APK.Z	2006		
TOTAL AMOUNT OF PAYMENT (\$) 255	Attorney Docket No.	1157.05		1		

TOTAL AMOUNT OF PAYE	лент (\$)	255		ttorney Docket	No. I	157.05	
METHOD OF PAYMENT	(check al	l that apply)					
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under 37 CFR WARNING: Information on this Information and authorization	form may be	ecome public, Cred	It card Intorr	nation should n	x be included	on this form. Pro	wide credit card
FEE CALCULATION							
1. BASIC FILING, SEAR	FILING		SEARCH	H FEES Small Entity		TION FEES	
Application Type	Fee (\$)	Fee (S)	Fee (\$)	Fee (S)	Fee (S)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	\$0.00
Design	200	100	100	50	130	65	\$0.00
Plant	200	100	300	150	160	80	\$0.00
Reissue	300	150	500	250	600	300	\$0.00
Provisional	200	100	0	0	. 0	0	\$0.00
2. EXCESS CLAIM FEE Fee Description Each claim over 20 (in Each independent claim Multiple dependent claim	ncluding R im over 3 (ues)			Fee (5) 50 200 360	Small Entity Fee (5) 25 100 180
Total Claims	Extra Clair	ms Fee (5)	Fee P	ald (\$)			sendent Claims
- 20 or HP =		x _25	_=			Fee (\$)	Fee Paid (\$)
HP = highest number of total (ndep. Claims - 3 or HP =	Extra Clair		Fee Pr	o <u>id (\$)</u>			
HP = highest number of indep		s paid for, if greater t	han 3.				
3. APPLICATION SIZE I If the specification and	drawings (
listings under 37 CI						all entity) for e	ach additional 50
sheets or fraction th Total Sheets - 100 =	Extra She		er of each e	d 37 CFR 1.1 additional 50 c round up to a v	r fraction the		<u>5)</u> <u>Foo Paid (5)</u>
4. OTHER FEE(S) Non-English Specific	ation, \$	I30 fee (no smal	l entity dis	scount)			Fees Paid (\$)

SUBMITTED BY					•	
Signature	Wonder	Buolin	Registration No. (Attorney/Agent)	32,202	Telephone	713-403-7411
Name (Print/Type)	Wendy K.B. Buskor)			Date	4/20/2006

Other (e.g., late filing surcharge): one month extension of time, 3 terminal disclaimer fees \$255.00

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